Title 13--DEPARTMENT OF SOCIAL SERVICES
Division 70—MO HealthNet Division
Chapter 20--Pharmacy Program

PROPOSED AMENDMENT

13 CSR 70-20.300 Retrospective Drug Use Review Process. The Department of Social Services is amending the purpose statement and sections (2), (3), (5), (6), (8), (9), (10), (11)**,** and (12), removing sections (7) and (14), and renumbering accordingly.

PURPOSE: The purpose of this rule amendment is to simplify language.

PURPOSE: This rule establishes [the division] ***the MO HealthNet Division (MHD)*** *process by which the Drug Utilization Review Board [will be]* ***is*** *established as required by Section 4401 of P.L. 101-508 (Omnibus Budget Reconciliation Act of 1990) and by section 208.175, RSMo.*

(2) *[A chairperson shall be elected by the board members.]* **The board members shall elect a chairperson.**

(3) The DUR Board shall meet at least once every ninety (90) days. A quorum of two-thirds (2/3) of the total members, including no fewer than three (3) physicians *[or]* **and** three (3) pharmacists, is required for the board to act in its official capacity.

(5) The members of the DUR Board shall receive no compensation for their services other than reasonable expenses *[actually incurred in the performance of]* **incurred in performing** their official duties.

(6) The DUR Board shall hold a public hearing during which *[the MO HealthNet Division]* **MHD** shall make recommendations to the board. *[The hearing shall be prior to any final decision by the division to require prior authorization for that pharmaceutical product, class, or category.]*

[(7) The tentative meeting agenda of the DUR Board with the therapeutic classes to be discussed shall be posted on the MO HealthNet Division website (www.dss.mo.gov/mhd) approximately fourteen (14) days prior but no less than seven (7) days prior to the meeting.

(A) The specific therapeutic class or classes to be considered at the next regularly scheduled DUR Board meeting shall be placed on the current agenda or posted on the website approximately thirty (30) days prior to the scheduled meeting.

(B) Any interested party shall be granted the opportunity for clinically relevant public comment for up to five (5) minutes per medication under review by the DUR Board. The responsibility of scheduling the presentation shall rest with the interested party. Interested parties representing a manufacturer shall be granted five (5) minutes in the aggregate per medication under review by the DUR Board.

(C) Following the consideration of all presented information, the DUR Board may accept or alter the recommendations from the MO HealthNet Division. The board shall make their final

recommendation to the MO HealthNet Division by a majority vote of the members of the committee present thereto in a recorded roll call vote.

(D) The specific therapeutic class or classes recommended for restriction by means of step therapy, clinical edit, fiscal edit, or preferred drug list shall be available on the division website at www.dss.mo.gov/mhd approximately fifteen (15) calendar days after the meeting.]

[(8)] **(7) MHD shall make available** *[A]***a**ny changes recommended by the DUR Board *[shall be made available]* via the approved minutes of the DUR Board meeting in a timely fashion, at least thirty (30) days *[prior to]* **before** the implementation of the recommendations.

[(9)] **(8)** The DUR Board shall provide, either directly or through contracts between *[the MO HealthNet Division]* **MHD** and accredited health-care schools, state medical societies, or state pharmacist associations or societies**,** or other appropriate organizations, for educational outreach programs as required by P.L. 101- 508, Section 4401, to educate practitioners on common drug therapy problems *[with the aim of improving]***and improve** prescribing and dispensing practices. This outreach shall include an educational newsletter to *[MO HealthNet]* **MHD** providers including appropriate drug use guidelines and MO HealthNet utilization statistics. The board activities shall *[include]* **consist of**:

(A) Establishment and implementation of medical standards and criteria for the prospective and retrospective DUR program;

(B) Development, selection, application, and assessment of educational interventions for physicians, pharmacists, and participants that improve care; and

(C) Administration of the Drug Prior Authorization Process as outlined in 13 CSR 70-20.200.

[(10)] **(9)** As specified by P.L. 101-508, Section 4401, the DUR Board shall monitor drug use*[,]* and prescribing and dispensing practices in the *[MO HealthNet]* **MHD** program. This monitoring shall include reviewing and refining therapeutic criteria modules used in *[both]* retrospective and prospective DUR*[, as well as]* and overseeing retrospective DUR intervention methods *[used]*.

[(11)] **(10)** The DUR Board shall advise *[the Department of Social Services]* **MHD** regarding all activities associated with the DUR process, including identifying types of intervention methods *[to be initiated by the review committees,]* ranging from letters to physicians and pharmacists, face-to-face education, and educational symposiums for targeted providers. The board shall provide educational support and guidance as needed by the review committees. The review committees, in turn, shall report intervention results and make recommendations *[based on these results to the board]* **the board based on these results**.

[(12)] **(11)** Patterns of inappropriate or aberrant prescribing or dispensing shall be identified and referred to the board *[in order for targeted education to be formulated]* **to formulate targeted education**.

[(13)] **(12)** Agency Responsibility Regarding Confidentiality of Information. All information concerning applicants and MO HealthNet participants shall be confidential**,** and any disclosure of

this information shall be restricted to purposes directly related to the administration of the medical assistance program. Purposes directly related to administration of the medical assistance program include:

(A) Establishing eligibility;

(B) Determining the amount of medical assistance;

(C) Providing services for recipients; and

(D) Conducting or assisting an investigation, prosecution, or civil or criminal proceeding related to the administration of the program.

[(14) Provider Responsibility Regarding Confidentiality of Information. All information concerning applicants and participants of medical services shall be confidential. Any disclosure of this information shall be restricted to purposes directly related to the treatment of the patient and promotion of improved quality of care. The confidential information includes:

(A) Names and addresses;

(B) Social Security number;

(C) Medical services provided;

(D) Social and economic conditions or circumstances;

(E) Medical data, including diagnosis and past history of disease or disability;

(F) Any information received for verifying income eligibility; and

(G) Any information received in connection with the identification of legally liable third-party resources.]

AUTHORITY: sections 208.153, 208.175, 208.201, and 660.017, RSMo 2016.* Original rule filed Dec. 14, 1992, effective June 7, 1993. Amended: Filed Sept. 16, 2013, effective March 30, 2014. Amended: Filed Sept. 16, 2020, effective March 30, 2021. *Original authority: 208.153, RSMo 1967, amended 1973, 1989, 1990, 1991, 2007, 2012; 208.175, RSMo 1992, amended 1993, 2011, 2014; 208.201, RSMo 1987, amended 2007; and 660.017, RSMo 1993, amended 1995. Amended: Filed October 23, 2024.

PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars ($500) in the aggregate.

PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars ($500) in the aggregate.

NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Department of Social Services, Legal Services Division-Rulemaking, PO Box 1527, Jefferson City, MO 65102-1527, or by email to Rules.Comment@dss.mo.gov. To be considered, comments must be received within thirty (30) days after publication of this notice in the ***Missouri Register****. No public hearing is scheduled.*